

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 3
 FOR SE OF FORM 24/48

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|---|---|--|---|---|---|---|--|--|--|---|---|---|--|--|--|---|---|---|---|---|---|--|--|--|--|--|--|
| NAME OF COMMITTEE (In Full) INDIANA JOBS NOW | | FEC IDENTIFICATION NUMBER ▼ C C00603159 | | | | | | | | | | | | | | | | | | | | | | | | | |
| Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report | | <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>M</td><td>M</td><td>M</td></tr> <tr><td> </td><td> </td><td> </td></tr> </table> <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>D</td><td>D</td><td>D</td></tr> <tr><td> </td><td> </td><td> </td></tr> </table> <table border="1" style="display:inline-table;"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table> | | M | M | M | | | | D | D | D | | | | Y | Y | Y | Y | Y | Y | | | | | | |
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|---|-------------|--|---|---|--|----------|---|---|----|----|------|
| Full Name of Payee CROSSROADS MEDIA LLC | | | Date of Public Distribution/Dissemination <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>M</td><td>M</td><td>M</td></tr> <tr><td>10</td><td>13</td><td>2016</td></tr> </table> | | | M | M | M | 10 | 13 | 2016 |
| M | M | M | | | | | | | | | |
| 10 | 13 | 2016 | | | | | | | | | |
| Mailing Address 66 CANAL CENTER PLAZA SUITE 555 | | | Amount <table border="1" style="display:inline-table; width:100%"> <tr><td>75062.50</td></tr> </table> | | | 75062.50 | | | | | |
| 75062.50 | | | | | | | | | | | |
| City ALEXANDRIA | State VA | Zip Code 22314 | Transaction ID : SE.4292 | | | | | | | | |
| Purpose of Expenditure MEDIA PLACEMENT | | Category/ Type 004 | Date of Disbursement or Obligation <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>M</td><td>M</td><td>M</td></tr> <tr><td>10</td><td>11</td><td>2016</td></tr> </table> | | | M | M | M | 10 | 11 | 2016 |
| M | M | M | | | | | | | | | |
| 10 | 11 | 2016 | | | | | | | | | |
| Name of Federal Candidate HOLLINGSWORTH, TREY, , , | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IN | | | | | | | | |
| Calendar Year-To-Date Per Election for Office Sought | | <table border="1" style="display:inline-table; width:100%"> <tr><td>192951.70</td></tr> </table> | 192951.70 | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ | | | | | | | |
| 192951.70 | | | | | | | | | | | |

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|---|-------------|--|---|---|--|----------|---|---|----|----|------|
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| M | M | M | | | | | | | | | |
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| 75062.50 | | | | | | | | | | | |
| City ALEXANDRIA | State VA | Zip Code 22314 | Transaction ID : SE.4293 | | | | | | | | |
| Purpose of Expenditure MEDIA PLACEMENT | | Category/ Type 004 | Date of Disbursement or Obligation <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>M</td><td>M</td><td>M</td></tr> <tr><td>10</td><td>11</td><td>2016</td></tr> </table> | | | M | M | M | 10 | 11 | 2016 |
| M | M | M | | | | | | | | | |
| 10 | 11 | 2016 | | | | | | | | | |
| Name of Federal Candidate YODER, SHELLI, , , | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IN | | | | | | | | |
| Calendar Year-To-Date Per Election for Office Sought | | <table border="1" style="display:inline-table; width:100%"> <tr><td>268014.20</td></tr> </table> | 268014.20 | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ | | | | | | | |
| 268014.20 | | | | | | | | | | | |

| | | |
|---|--|-----------|
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | <table border="1" style="display:inline-table; width:100%"> <tr><td>150125.00</td></tr> </table> | 150125.00 |
| 150125.00 | | |
| (b) SUBTOTAL of Unitemized Independent Expenditures | <table border="1" style="display:inline-table; width:100%"> <tr><td> </td></tr> </table> | |
| | | |
| (c) TOTAL Independent Expenditures.....▶ | <table border="1" style="display:inline-table; width:100%"> <tr><td> </td></tr> </table> | |
| | | |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

REISNER, MICHELE, , ,

[Electronically Filed]

Date

| | | |
|----|----|------|
| M | M | M |
| 10 | 15 | 2016 |

Signature